Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known			
FEE TRANSMITTAL				Application Number 10/564,67		74	
				Date	7/15/2004		
For FY 2009				Named Inventor	Marcel Wijlaars		
Applicant claims small entity status. See 37 CFR 1.27				Examiner Name Caralyr		ne Helm	
Typholic olding shart shart states see 57 GTR 127			Art U	Art Unit 1615			
TOTAL AMOUNT OF PAYMENT (\$) \$1030.00			Attorr	Attorney Docket 0470 - 060131			
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order Other (please identify):							
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		CH FEES Small Entity	EXAMINA	TION FEES		
Application Type F	Small En See (\$) Fee (\$		Fee (\$)	Fee (\$)	Fee (\$)	Fees Pa	id (\$)
Utility	330 82	540	270	220	110		
Design	220 110	100	50	140	70		
Plant	220 110	330	165	170	85	•	
Reissue	330 165	540	270	650	325		
Provisional	220 110	0	0	0	0		
2. EXCESS CLAIM FEES Small Entity							
Fee Description Fee (\$)							<u>Fee (\$)</u>
Each claim over 20 (including Reissues) 52							26
Each independent claim over 3 (including Reissues)						220 390	110
Multiple dependent claims		o Cloima I	Zno (©)	Foo Doid (C)			195 pendent Claims
Total Claims - 20 o	<u> </u>	<u>ra Claims</u> <u>F</u> x	<u>ree (\$)</u> =	Fee Paid (\$)		Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims -3 or			Fee (\$)	Fee Paid (\$)			
HP = highest number of inde	enendent claims paid		=				
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof.							
See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction thereof</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u>							
100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S) Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2-Month Extension of Time (\$490) and Notice of Appeal (\$540) fees							\$1030.00
SUBMITTED BY Registration No.							
Signature (Attorney/Agent) 22,132 Telephone 412-							2-471-8815
Name (Print/Type) William H. Logsdon						Date June 29, 2010	